Introduction to the Right Choices Program

Indiana Family and Social Services Administration
Office of Medicaid Policy and Planning
IHCP Works Annual Seminar 2021



Acronyms

- Right Choices Program (RCP)
- Primary Medical Provider (PMP)
- Right Choices Program Administrator (Administrator)
- Fee for services (Traditional Medicaid)
- Managed Care Entity (MCE)



Agenda

- RCP Overview
- Lock-In PMP
- Lock-In Pharmacy
- Referring Providers
- Removal from RCP
- Fraud, Waste & Abuse
- RCP Letters



RCP Overview





What is the Right Choices Program (RCP)?

 The lock-in program developed by the Indiana Health Coverage Programs (IHCP) in accordance with Federal Regulations and the Indiana Administrative Code.

 To provide quality care through healthcare management, ensuring that the right service is delivered at the right time and in the right place for each member.

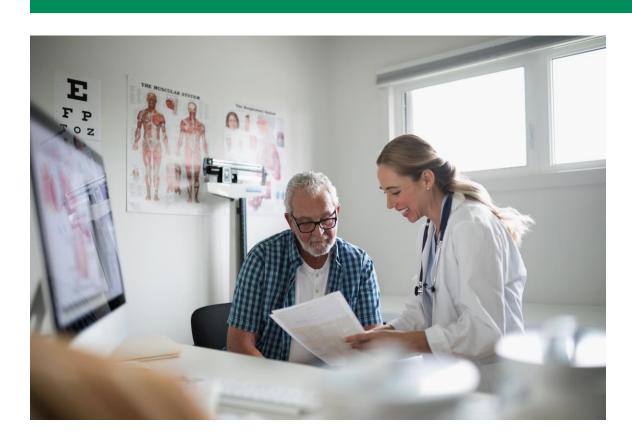


Who are RCP Administrators?

- Gainwell Technologies serves as the RCP Administrator on behalf of the State for members who receive fee-for-service (FFS) benefits under the Traditional Medicaid program.
- Managed care entities (MCEs) serve as the RCP Administrators for members in managed care programs.



Who is in the Right Choices Program?



- Members are selected based on behavior patterns and utilization practices.
- Initiated by referral, based on reports of potential overuse/abuse.
- Member is locked-in to a single primary medical provider (PMP), a pharmacy, and approved specialty providers, as appropriate.

Did you know? Anyone can refer a member to the Right Choices Program, including parents, spouses, friends and others.

Contacting an RCP Administrator

1-844-284-1798

Fax (Physical Health Inpatient and Outpatient): 1-866-406-2803

Fax (Behavioral Health Inpatient): 1-877-434-7578 Fax (Behavioral Health Outpatient): 1-866-877-5229

Pharmacy Services
PBM: IngenioRx
Pharmacy Information
Claims: 1-833-235-2024
PA: 1-844-284-1798

PA Fax (Retail Pharmacy): 1-844-864-7860 PA Fax (Medical Injectable): 1-888-209-7838 Help for Pharmacists: 1-833-236-6191

Dental Services
DBM: DentaQuest

1-855-453-5286

DentaQuest Provider Portal

Fax: 1-262-834-3589 Vision Services

VBM: Superior Vision

superiorvision.com/eve-care-professionals

1-877-235-5317 Fax: (518) 556-7707 1-866-912-4245

Fax (Behavioral Health Inpatient): 1-844-288-2591 Fax (Behavioral Health Outpatient): 1-866-694-3649

Pharmacy Services PBM Claims: CVS Health PBM PA: US Script Pharmacy Information Claims: 1-800-378-0779 PA: 1-866-399-0928

PA Fax: 1-866-399-0929 (standard) PA Fax: 1-855-678-6976 (specialty)

Dental Services
DBM: Envolve Dental
Envolve Dental Provider Portal
1-855-609-5157

Vision Services VBM: Envolve Vision

visionbenefits.envolvehealth.com

1-866-599-1774 (Hoosier Healthwise and Hoosier Care Connect) 1-844-820-6523 (HIP) Fax: 1-844-897-6514

Pharmacy Services PBM: OptumRX Pharmacy Information Claims: 1-866-215-5046 PA: 1-877-610-9785 PA Fax: 1-844-897-6514

Dental Services
UHCdentalproviders.com
1-844-402-9118

Vision Services marchylisioncare.com 1-844-486-2724

Care Management - Right Choices Program (RCP)



RCP Administrator

Gainwell – FFS Traditional Medicaid

1-800-784-3981 Fax: 1-877-392-6894 Anthem – HIP, Hoosier Healthwise, and Hoosier Care Connect

1-866-902-1690, option 1 Fax: 1-866-387-2959 MDwise – HIP and Hoosier Healthwise

1-800-356-1204 Fax: (317) 822-7500 MHS – HIP, Hoosier Healthwise, and Hoosier Care Connect

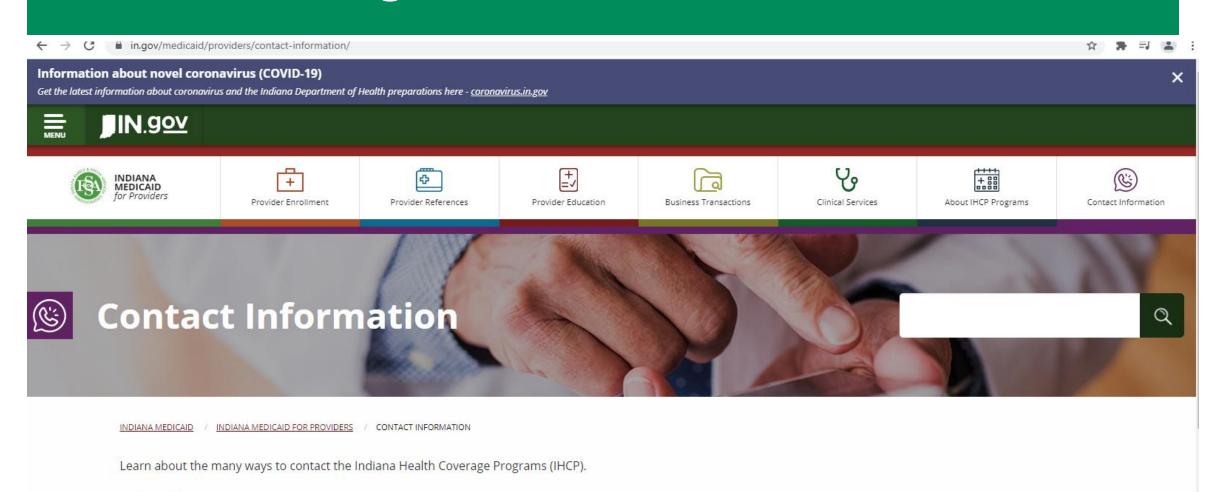
1-877-647-4848 Fax: 1-866-753-7240 CareSource – HIP and Hoosier Healthwise

1-800-488-0134 (TTY: 1-800-750-0750) Fax: 1-877-603-5119 United Healthcare – Hoosier Care Connect

1-800-832-4643, (TTY and TDD: 711) Fax: 1-888-843-6007

Version 9.1 4 March 2021

Contacting an RCP Administrator Cont.



Contact Us

o Territory Map

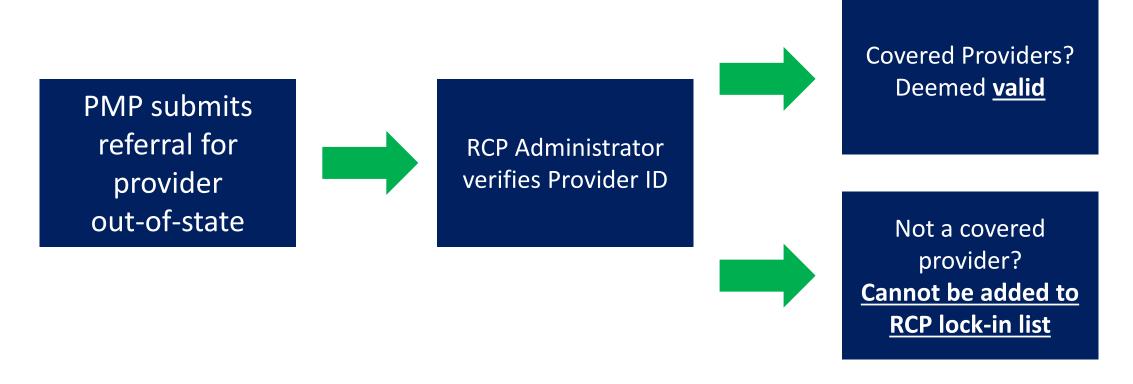
Policy Consideration Requests
 IHCP Quick Reference Guide
 Provider Relations Consultants

Which Providers are in RCP?

- Members are assigned two lock-in providers
 - Primary medical provider (PMP)
 - Pharmacy
- Other specialty providers or nonlock-in pharmacy, require referral from PMP



Which Providers are in RCP? cont.



Services Carved Out of RCP

- Behavioral health services *
- Chiropractic services
- Dental services *
- Diabetes self-management training (DSMT) services
- Family planning services
- Home health care
- Hospice (Note: When the RCP
 Administrator receives notification that a member is approved for IHCP hospice benefits, the member is removed from the RCP.)

- Podiatry services
- Transportation services
- Routine eye care (except surgery)
- Home and Community-Based Services (HCBS)
 waiver services



Lock-In Responsibilities





Lock-in PMP Responsibilities

- Member is "locked-in" to one primary medical provider
- Using one Medical practitioner reduces risk or:
 - Adverse health outcomes
 - Contradictory medical treatment
- Goal of PMP Intervention
 - Improve member's care
 - Improve health outcomes



Did you know? The same provider specialties eligible to serve as PMPs for managed care programs are eligible for assignment as the RCP PMP.

Lock-in Pharmacy Responsibilities

- RCP Administrator sends letter to confirm lock-in status
- Lock-in pharmacy must fill prescriptions
- Prescriptions must be
 - 1. Written by valid referral providers
 - 2. Presented at member's primary lockin pharmacy
 - 3. Prescribers must appear on members lock-in list to receive coverage

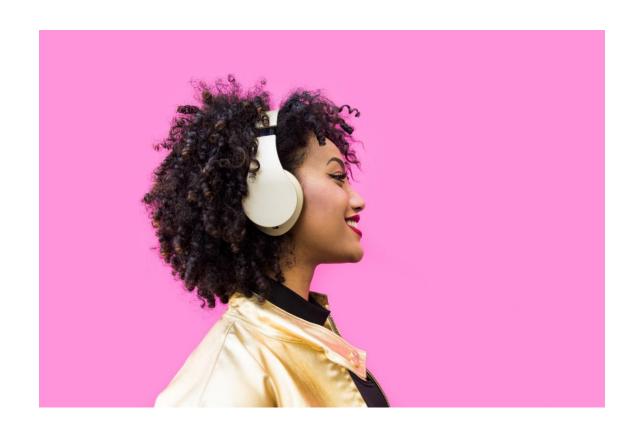


Billing RCP Services



- FFS nonpharmacy claims
 Claims Submission and Processing Module
- Pharmacy claims
 Pharmacy Services Module
- Managed Care Claims
 Contact the MCE with which the member is enrolled.

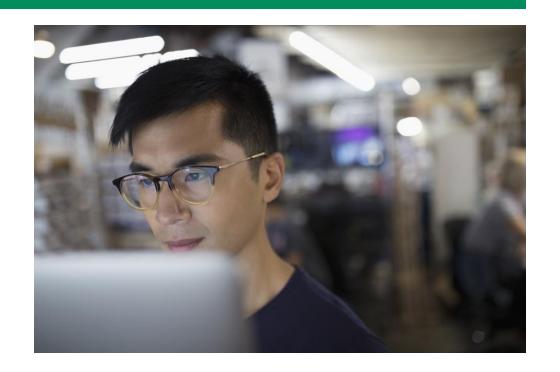
Referrals & Changes



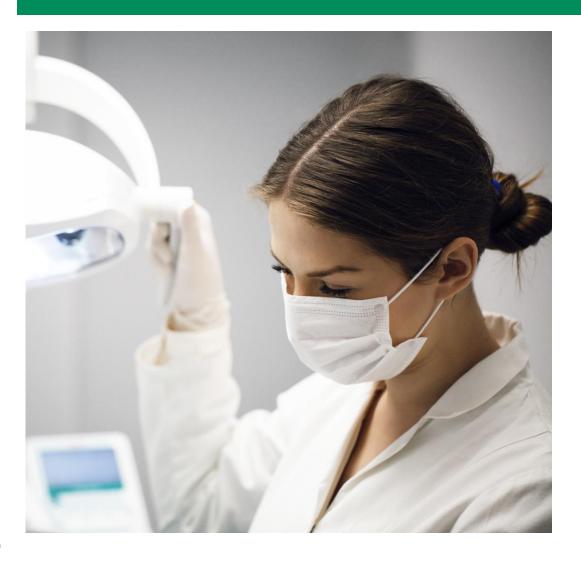


Referral Providers

- Adding Referral Providers
 - PMP can refer a non-lock-in pharmacy pursuant to member's needs
- PMP sends referral to RCP Admin
 - Mail or Fax
 - Through the Portal
 - Log in to the IHCP Provider Healthcare Portal (Portal), accessible from the home page at in.gov/medicaid/providers.
 - From the Care Management tab of the Portal menu bar, select Submit RCP Referral to Lock-In List.



Referral Providers cont.

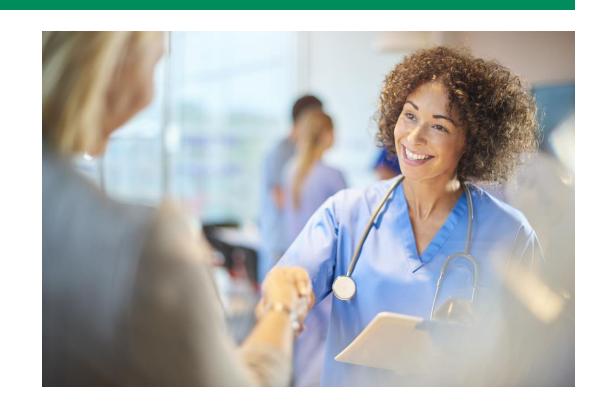


- Referring Providers
 - If member requires evaluation or treatment by specialist
 - If member needs pharmacy other than lock-in
- Retro Referrals
 - If PMP unavailable, temporary physician coverage may be approved
 - If PMP approved services but failed to submit referral
- Referral for carved out services
 - Not required, but ensures better coordination of care

Changing PMP

Member initiates change

- Access to member moves more than 30 miles from current PMP
- Current PMP move more than 30 miles from member
- Current PMP's office not accessible on public transit
- IHCP-reimbursable transportation not available
- Excessive delays between requests for appointments and scheduled appointments, as noted in a doc pattern over 6 months.



Changing PMP cont.



Provider initiates change

- Give a letter to the member, with 30 days' notice, stating that the member's care by the provider is being terminated.
- Referrals made by the terminating provider will expire 30 calendar days after the RCP Administrator's receipt of the dismissal.

RCP Removal





Removal from RCP

Exit Care Conference to Examine appropriateness of care & utilization

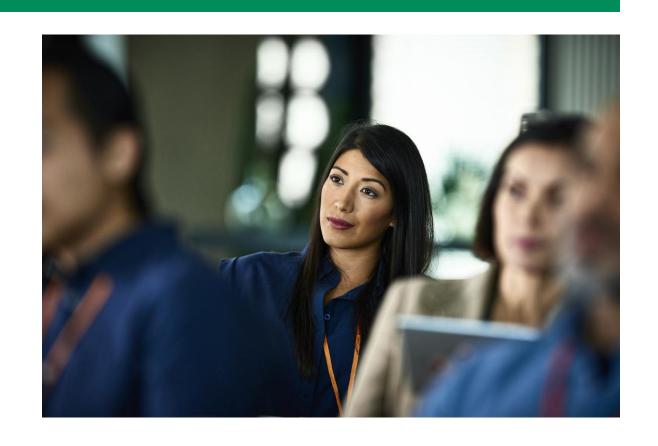
- Member's assigned care or case manager
- Lock-in PMP or designee
- Primary lock-in pharmacy staff or designee
- RCP Administrator's staff
- Pharmacy director or medical director



Removal from RCP cont.

Conference Results

- 1. Member has been compliant:
 - Removed from RCP
- 2. Member has *not* been compliant
 - continue in RCP (up to 2 years)
- 3. Referral to law enforcement
 - continue in RCP (up to 2 years)



Early RCP Removal



- Member assigned to hospice care
- The member appealed and received a judgment in favor of the appellant
- Member receives Medicare benefits in addition to IHCP Medicaid benefits
- Member dies
- Member is placed in 590 Program facility

Fraud, Waste & Abuse





Fraud, Waste, & Abuse

Member behavior:

- Paying cash for services covered by Medicaid
- Selling drugs, equipment, or supplies
- Lending someone a Medicaid ID card
- Using multiple physicians for the same condition
- Purchasing the same medications from multiple pharmacies
- Frequenting the ER for non-EMS services



Fraud, Waste, & Abuse Cont.



Provider behavior:

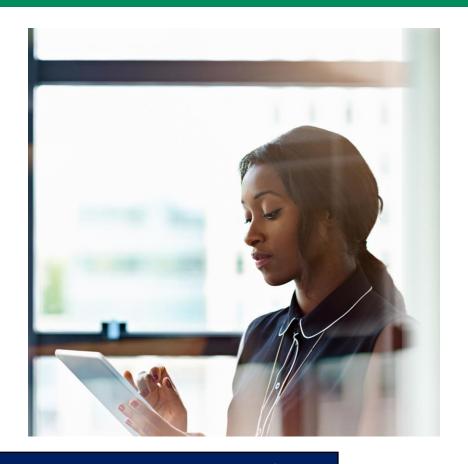
- Billing inappropriately, such as double billing or billing for services not provided
- Acting in violation of State statutes or Medicaid rules
- Billing members for services that should be billed to Medicaid
- Balance billing to members as defined in 42 CFR 447.15 (for example, billing individual patients for the difference between the amount paid by the State and the provider's customary charge)

Fraud, Waste, & Abuse cont.

Suspicion of bad behavior should be identified, documented and reported to RCP Administrator.

RCP Administrator reports activity to FSSA Fraud Hotline

- **1**-800-457-4515
- Program.Integrity@fssa.in.gov



Did you know? Providers and pharmacies should report issues of suspected Medicaid Fraud to the FSSA Fraud Hotline.

RCP Letters



System Generated Letters

- Provider Assignment Letter
- PMP Assignment Letter
- PMP RCP Lock-in Provider Letter
- Pharmacy Provider Assignment Letter
- Pharmacy RCP Lock-In Provider Letter

For examples of RCP letters, see the RCP provider reference module at in.gov/Medicaid/providers.

Questions? Please Stand By!



